



HANDLING & PROCESSING ORGANIC SYSTEM PLAN

NAME: _____ COUNTY: _____

BUSINESS NAME: _____

A. GENERAL INFORMATION

Year company began: _____ Year first certified: _____

Name of person overseeing organic production: _____

Are employees trained on organic handling/processing requirements? ☐ Yes ☐ No

If "Yes", please describe the training process. _____

Has your business applied for certification previously? ☐ Yes ☐ No

If "Yes", list the certifier, the year the application was made, and the outcome of the application: _____

Have you ever been denied certification? ☐ Yes ☐ No

If "Yes", please describe the circumstances. _____

List current organic certification by other agencies: _____

Preferred time and season for inspection visit: ☐ Morning ☐ Afternoon Season: _____

B. HANDLER CATEGORIES (If you are a processor, please move on to section "C".)

Please indicate which categories apply to your business. Check all categories that apply.

- ☐ **Packer**
A packing operation receives raw agricultural products and packs the products for shipping. The packer may or may not take title to the product. A packer may be involved in cleaning the products prior to packing.
- ☐ **Repacker**
A repacker receives packed or packaged products, removes the products from the original container, may or may not sort the product, and repacks the product for sale in either the original container or in a different container.
- ☐ **Distributor**
A distributor receives packed or processed agricultural products, usually from shippers, processors, or other distributors, and sells or distributes those products to processors, other distributors or retail stores. Distributors may or may not take title to the product.
- ☐ **Warehouse**
A warehouse receives and stores products. A warehouse does not take legal title to the product. A warehouse does not open product containers, mix, combine, or otherwise handle the product while it is in custody.
- ☐ **Broker**
A broker acts as an agent for others in negotiating a sales contract. A broker may or may not take legal title to the product.
- ☐ **Retailer**
A retailer is a business operating from an established place of business that sells food products directly to consumers. If you plan to apply for certification for part of your retail business, please indicate which departments you plan to get certified: _____
- ☐ **Other:** _____



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C. CERTIFICATION VERIFICATION

Do you have organic certificates that cover all of the organic products that you handle/process? ☐ Yes ☐ No

How often are the certificates updated? ☐ Monthly ☐ Yearly ☐ Other _____

Are all of the certificates from USDA Accredited Organic Certification Agencies? ☐ Yes ☐ No

Do you obtain valid organic certificates from USDA Accredited Organic Certification Agencies prior to processing new products? ☐ Yes ☐ No

D. HARVEST AND TRANSPORTATION

Are you responsible for harvest or transportation of organic product(s)? ☐ Yes ☐ No (If "No", do not complete this section.)

Are you responsible for hauling the organic product(s) from the field to your facility? ☐ Yes ☐ No

Explain how containers of organic products are identified at receiving. Are they labeled as organic when they are received? Do they have an identity code or lot code? ☐ N/A (Not Applicable)

Does the Bill of Lading or other transportation document clearly indicate that the product is organic?

☐ Yes ☐ No ☐ N/A

If you use bulk trucks to haul product, what measures do you take to protect the integrity of the organic products? (Check those that apply to your facility). ☐ N/A No bulk product received.

☐ Use clean truck affidavits ☐ Clean containers prior to harvest - Is this documented? ☐ Yes ☐ No

☐ Other _____

E. RECEIVING AND STORAGE

Does this facility receive or store organic product? ☐ Yes ☐ No (If "No", do not complete this section.)

Are non-organic products processed at your facility? ☐ Yes ☐ No

What records do you keep upon receipt of organic product into your facility? (Check those that apply.)

☐ Bill of lading ☐ Invoice ☐ Scale ticket ☐ Receiving ticket ☐ Other _____

Is an internal lot code assigned at the time of receipt? ☐ Yes ☐ No

If "Yes", describe the lot numbering System. _____

Do you receive bulk product? ☐ Yes ☐ No

If "Yes", is the incoming organic bulk product storage area clearly identified as organic? ☐ Yes ☐ No



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F. PROCESSING, PACKING, OR REPACKING

Does this facility process, pack, or repack organic product(s)? ☐ Yes ☐ No (If "No", do not complete this section.)

What records are kept when you process, pack or repack organic products? (Check those that apply.)

- | | | |
|--|---|--|
| <input type="checkbox"/> Daily production log | <input type="checkbox"/> Waste log | <input type="checkbox"/> Cleaning of lines |
| <input type="checkbox"/> Shift production log | <input type="checkbox"/> Shrinkage log | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> QC report | <input type="checkbox"/> Daily production tally | |
| <input type="checkbox"/> Product specification sheet | <input type="checkbox"/> Chlorine levels | |

Do you clean the lines prior to processing/packing organic products? ☐ Yes ☐ No ☐ N/A (Not Applicable)

If "Yes", please list the cleansers and sanitizers that are used on food bearing surfaces.

Material (Complete Name)	Application and Use (Explain how the material is used, what it is used on, and how often it is used.)

Could any cleanser or sanitizer contaminate the organic product(s)? ☐ Yes ☐ No ☐ N/A (Not Applicable)

Are quaternary ammonium compounds used for sanitizing food-bearing surfaces? ☐ Yes ☐ No ☐ N/A

If "Yes", what steps are taken to insure that they do not leave any residues on the organic food bearing surfaces?

Are post harvest materials used in your facility? ☐ Yes ☐ No

If "Yes", list the post harvest materials in the table below. Include waxes, atmospheric gases, fungicides, sanitizers and cleansers used in process water and any other material that could contact the food products.

Product (Complete Name)	Used during organic packing?	Application and Purpose



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G. WATER AND STEAM

Is water used in the processing, packing, or repacking of organic products? ☐ Yes ☐ No (If "No", do not complete this section.)

What is the water source at your facility? _____

Is the water re-circulated? ☐ Yes ☐ No

Is the water potable? ☐ Yes ☐ No

Do you treat the water on site? ☐ Yes ☐ No

Is chlorine used in wash water or flume water? ☐ Yes ☐ No ☐ N/A (Not Applicable)

If "Yes", is chlorine maintained at 50 ppm or below? ☐ Yes ☐ No

How is this monitored? _____

Is it followed by a potable water rinse? ☐ Yes ☐ No

Is culinary steam used in the processing, packing, or repacking of organic products? ☐ Yes ☐ No

If steam has direct contact with organic products, do you use: ☐ N/A No direct contact

☐ Steam filters ☐ Condensate traps ☐ Other _____

List products used as boiler additives: _____

Do you implement water conservation strategies at your facility? ☐ Yes ☐ No

If "Yes", please describe. _____

H. PACKAGING

Does this facility package organic product(s)? ☐ Yes ☐ No (If "No", do not complete this section.)

What type(s) of packaging materials do you use? (Check all that apply.)

<input type="checkbox"/> Paper	<input type="checkbox"/> Glass	<input type="checkbox"/> Aseptic
<input type="checkbox"/> Cardboard	<input type="checkbox"/> Metal	<input type="checkbox"/> Synthetic fiber
<input type="checkbox"/> Wood	<input type="checkbox"/> Foil	<input type="checkbox"/> Natural fiber
<input type="checkbox"/> Plastic	<input type="checkbox"/> Waxed paper	<input type="checkbox"/> Other _____

Are packaging materials food grade? ☐ Yes ☐ No

Are packaging materials free of prohibited materials? ☐ Yes ☐ No

Are packaging materials recyclable? ☐ Yes ☐ No

Are packaging materials returnable? ☐ Yes ☐ No

Is organic identity clear on all packaging and labeling? ☐ Yes ☐ No

Describe how you identify packaging as organic. _____



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Is all packaging and labeling equipment cleared of organic identification prior to all subsequent conventional runs?

☐ Yes ☐ No

Describe how partial pallets/boxes/drums/etc. of organic products are processed. ☐ N/A (Not Applicable)

I. STORAGE AND SHIPPING

Does this facility store or ship organic product(s)? ☐ Yes ☐ No (If "No", do not complete this section.)

What warehouse, shipping, and sales documents do you maintain? (Check all that apply.)

☐ Pallet/tote ticket ☐ Purchase/sale order ☐ Other _____
☐ Picking ticket ☐ Bill of lading
☐ Warehouse inventory ☐ Sales invoice

Do all documents clearly identify the product as organic? ☐ Yes ☐ No

Where do you store organic products? _____

Are organic products stored in Controlled Atmosphere? ☐ Yes ☐ No

If "Yes", are the organic controlled atmosphere rooms on a separate air supply from rooms that contain treated fruit?

☐ Yes ☐ No

J. PEST MANAGEMENT

What type of pest management system do you use?

☐ In-house - Name of responsible person: _____ Phone: _____
☐ Contract service - Name: _____ Phone: _____

What type of pest problems have you had?

☐ None ☐ Crawling insects ☐ Product contamination
☐ Flying insects ☐ Rodents ☐ Other _____

What monitoring techniques are used to monitor pests?

☐ Pheromone traps ☐ Product sampling ☐ Other _____

What preventative and/or management methods are used to control pests *inside* your facility?

☐ Good sanitation ☐ Removal of exterior habitat/food ☐ Crack and crevice sprays*
☐ Sealed doors/windows ☐ sources ☐ Insecticidal sticky strips/traps*
☐ Air curtains ☐ Bait/baited traps* ☐ Other _____
☐ U.V. light insectocutors ☐ Fogging*
☐ Sticky traps ☐ Fumigation*

**Organic products must be removed from the building to implement these pest control methods.* Explain how organic products are protected from exposure to these materials. _____



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K. STANDARD OPERATION PROCEDURES

Does your facility have Standard Operation Procedures for processing organic products? ☐ Yes ☐ No

If "Yes", please attach a copy of these operating procedures to this Organic Processing System Plan.

L. QUALITY ASSURANCE

Do you have a Quality Assurance program in place? ☐ Yes ☐ No

If "Yes", what program do you use? ☐ American Institute of Baking ☐ Total Quality Management

☐ Hazard Analysis of Critical Control Points ☐ Other _____

Do you have a product recall system in place? ☐ Yes ☐ No

If "Yes", please describe. _____

M. FLOW CHART / CHAIN OF CUSTODY

Provide a flow chart that outlines the flow of organic product through the facility. Include receiving, initial storage, processing procedures, final packaging, and storage.